

Bureau of Health Care Quality & Compliance

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: NVS412AGC	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED 02/26/2009
NAME OF PROVIDER OR SUPPLIER ST MICHAELS GROUP HOME 2		STREET ADDRESS, CITY, STATE, ZIP CODE 4423 E WYOMING AVENUE LAS VEGAS, NV 89104		
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
Y 000	Initial Comments Surveyor: 27364 The findings and conclusions of any investigation by the Health Division shall not be construed as prohibiting any criminal or civil investigations, actions or other claims for relief that may be available to any party under applicable federal, state, or local laws. This Statement of Deficiencies was generated as a result of an annual State Licensure survey conducted at your facility on 2/26/2009. This State Licensure survey was conducted by the authority of NRS 449.150, Powers of the Health Division. The facility was licensed for 6 Residential Facility for Group beds for elderly and disabled person and/or persons with mental illness, Category I residents. The census at the time of the survey was 7. Seven resident files were reviewed and 4 employee files were reviewed. The following deficiencies were identified:	Y 000	<i>Acceptable POC D. W. [Signature] 4/18/09</i>	
Y 067 SS=C	449.196(1)(c) Qualifications of Caregiver- Read regulation NAC 449.196 1. A caregiver of a residential facility must: (c) Understand the provisions of NAC 449.156 to 449.2766, inclusive, and sign a statement that he has read those provisions. This Regulation is not met as evidenced by:	Y 067	<i>Y 067 A. Employees # 1, 2, 3 and 4 have read and signed a statement that they have read and understood those provisions on NRS 449. See attachment #1.</i>	

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LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE *Luz B. Aguino* TITLE *Adm* (X6) DATE *4/8/09*

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BUREAU OF LICENSURE AND CERTIFICATION
LAS VEGAS, NEVADA

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Y 067	Continued From page 1 Surveyor: 27364 Based on record review on 2/26/09, the facility failed to ensure 4 of 4 caregivers read the provisions of NAC 449.156 to 449.2766 and signed a statement they have read those regulations (Employee #1, #2, #3 and #4). Severity: 1 Scope: 3	Y 067	<p>B. All employee files will be reviewed every 6 months to ensure that they have signed, read, and understood provisions on NRS 449. The owner and adm will monitor for compliance.</p> <p>c. 4/8/09.</p> <p>Y 072</p> <p>A. Employee #3 has been enrolled in a Medication Management class to be held on 5/13/09.</p> <p>B. All employee files will be reviewed monthly to ensure all employees are current in their certifications. The adm and owner will monitor for compliance.</p>	
Y 072 SS=E	<p>449.196(3) Qualifications of Caregiver-Med re-training</p> <p>NAC 449.196</p> <p>3. If a caregiver assists a resident of a residential facility in the administration of any medication, including, without limitation, an over-the-counter medication or dietary supplement, the caregiver must:</p> <p>(a) Receive, in addition to the training required pursuant to NRS 449.037, at least 3 hours of training in the management of medication. The caregiver must receive the training at least every 3 years and provide the residential facility with satisfactory evidence of the content of the training and his attendance at the training; and</p> <p>(b) At least every 3 years, pass an examination relating to the management of medication approved by the Bureau.</p> <p>This Regulation is not met as evidenced by: Surveyor: 27364 Based on record review on 2/26/09, the facility failed to ensure 1 of 4 caregivers had completed</p>	Y 072		

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Y 072	Continued From page 2 the required medication management training (Employee #3). Severity: 2 Scope: 2	Y 072	C. 4/8/09	
Y 087 SS=I	449.199(3) Limitation on Number of Residents NAC 449.199 3. A residential facility must not accept residents in excess of the number of residents specified on the license issued to the owner of the facility. This Regulation is not met as evidenced by: Surveyor: 27364 Based on observation, record review and interview on 2/26/09 the facility was over census. Findings include: On 2/26/09 at 10:00 AM, 7 residents and 2 caregivers were observed at the facility. Record review revealed 7 current resident files were maintained by the facility. Review of Resident #7's file included an admission record dated 10/15/08 signed by Resident #7 and Employee #4, the Administrator. A review of the facility's current license indicated the home was licensed for 6 residents. On 2/26/09 at 4:00 PM, Employee #1 stated "we currently have 7 residents." Employee #1 said "I accepted him (Resident #7) because the social	Y 087	Y087 A. Resident #7 has been transferred to another facility on 3/19/09. B. The owner and adm accept that a mistake has been done and want to assure the Bureau that it won't be repeated in the future. The adm will monitor for compliance. C. 4/8/09.	

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Y 087	Continued From page 3 services agency begged me to take him. But at that time I had only 3 residents." Severity: 3 Scope: 3	Y 087		
Y 103 SS=F	449.200(1)(d) Personnel File - NAC 441A NAC 449.200 1. Except as otherwise provided in subsection 2, a separate personnel file must be kept for each member of the staff of a facility and must include: (d) The health certificates required pursuant to chapter 441A of NAC for the employee. This Regulation is not met as evidenced by: Surveyor: 27364 Based on record review on 2/26/09, the facility failed to ensure 3 of 4 caregivers complied with NAC 441A.375 regarding tuberculosis testing (Employee #1, #2 and #3). Based on record review on 2/26/09, the facility failed to ensure 2 of 4 caregivers complied with NAC 441A.375 regarding a new employment physical exam (Employee #1, and #3). Severity: 2 Scope: 3	Y 103	Y103 A. Employee 1 + 2 have TB tests done see attachment #2. Employee #3 has resigned 2/10/09 Employee 1 + 2 have physical exam done see attachment #2. B. Employee files will be checked monthly to ensure that they're current on these things. Adm will monitor for compliance. C. 4/8/09	
Y 105 SS=F	449.200(1)(f) Personnel File - Background Check NAC 449.200 1. Except as otherwise provided in subsection 2,	Y 105		

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BUREAU OF LICENSURE AND REGULATION
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Y 105	Continued From page 4 a separate personnel file must be kept for each member of the staff of a facility and must include: (f) Evidence of compliance with NRS 449.176 to 449.185, inclusive. This Regulation is not met as evidenced by: Surveyor: 27364 Based on record review on 2/26/09, the facility failed to ensure 4 of 4 caregivers had a written statement from the employee stating whether they had been convicted of the crimes listed in NRS 449.188 (Employee #1, #2, #3, and #4). The facility failed to ensure 1 of 4 caregivers had a background check completed (Employee #1). Severity: 2 Scope: 3	Y 105	Y 105 A. Employees #1, 2, 3 and 4 have a written statement that they have not been convicted of any crimes. Employee #4 had sent for a background check see attachment # 3. B. Employee files will be checked monthly to ensure all the above things are current. Adm will monitor for compliance. C. 4/8/09	
Y 175 SS=F	449.209(4)(b) Health and Sanitation-Hazards NAC 449.209 4. To the extent practicable, the premises of the facility must be kept free from: (b) Hazards, including obstacles that impede the free movement of residents within and outside the facility. This Regulation is not met as evidenced by: Surveyor: 27364 Based on observation on 2/26/09, the facility failed to ensure the exterior of the facility was free from hazards and well maintained. A broken window was observed on the exterior of Bedroom #3	Y 175	Y 175 A. The broken window on bedroom #3 has been replaced. B. Clients and Caregivers will be encouraged to report any broken windows. Adm will monitor for compliance. C. 4/8/09	

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Y 175	Continued From page 5 Severity: 2 Scope: 3	Y 175		
Y 179 SS=C	449.209(6) Health and Sanitation-Screens NAC 449.209 6. All windows that are capable of being opened in the facility and all doors that are left open to provide ventilation for the facility must be screened to prevent the entry of insects. This Regulation is not met as evidenced by: Surveyor: 27364 Based on observation on 2/26/09, the facility failed to ensure 4 of 6 windows for ventilation were screened. (Bedroom #2, Bedroom #3, Bedroom #5, and Bedroom #6). Severity: 1 Scope: 3	Y 179	<i>Y179</i> <i>A. All windows in the facility have been screened to prevent the entry of insects.</i> <i>B. Clients and caregivers are encouraged to report any windows without screen. Adm will monitor for compliance.</i> <i>C. 4/8/09</i>	
Y 251 SS=F	449.217(2) Storage of Food-Perishable foods refrigerated NAC 449.217 2. Perishable foods must be refrigerated at a temperature of 40 degrees Fahrenheit or less. Frozen foods must be kept at a temperature of 0 degrees or less. This Regulation is not met as evidenced by: Surveyor: 27364 Based on observation on 2/26/09, the facility	Y 251	<i>Y251</i> <i>A. The refrigerator's temperature has been adjusted to 40 degrees Fahrenheit and will be maintained that way.</i> <i>B. The refrigerator's temperature will be checked daily that its 40 degrees or less. Adm will monitor for compliance.</i> <i>C. 4/8/09</i>	

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Y 251	Continued From page 6 failed to ensure the refrigerator maintained a temperature of 40 degrees Fahrenheit or less. The refrigerator recorded a reading of 50 degrees Fahrenheit on 2/26/09. Severity: 2 Scope: 3	Y 251			
Y 450 SS=F	449.231(1) First Aid and CPR NAC 449.231 1. Within 30 days after an administrator or caregiver of a residential facility is employed at the facility, the administrator or caregiver must be trained in first aid and cardiopulmonary resuscitation. The advanced certificate in first aid and adult cardiopulmonary resuscitation issued by the American Red Cross or an equivalent certification will be accepted as proof of that training. This Regulation is not met as evidenced by: Surveyor: 27364 Based on record review on 2/26/09 the facility failed to ensure 2 of 4 caregivers were trained in first aid and cardiopulmonary resuscitation (Employee #1, and #3). Severity: 2 Scope: 3	Y 450	Y 450 A. Employee #1 has attended first aid + CPR classes, see attachment # 4. Employee has resigned 2/10/09. B. Employee checklist will be checked monthly to ensure they're current on their training or certifications. Adm will monitor for compliance. C. 4/8/09.		

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Y 859	Continued From page 7	Y 859		
Y 859 SS=E	449.274(5) Periodic Physical examination of a resident NAC 449.274 5. Before admission and each year after admission, or more frequently if there is a significant change in the physical condition of a resident, the facility shall obtain the results of a general physical examination of the resident by his physician. The resident must be cared for pursuant to any instructions provided by the resident's physician. This Regulation is not met as evidenced by: Surveyor: 27364 Based on record review on 2/26/09, the facility failed to ensure 4 of 7 residents received an annual physical (Resident #2, #4, #5 and #7). Severity: 2 Scope: 3	Y 859	<p>Y 859</p> <p>A. Residents 2, 4 & 5 have been scheduled for physical exam with their physician by April 20, 2009. Resident # 7 has left.</p> <p>B. Residents' files will be checked monthly to ensure that they have physical exam done every year. Adm. will monitor for compliance.</p>	
Y 876 SS=D	449.2742(4) NRS 449.037 NAC 449.2742 4. Except as otherwise provided in this subsection, a caregiver shall assist in the administration of medication to a resident if the resident needs the caregiver's assistance. A caregiver may assist the ultimate user of controlled substances or dangerous drugs only if the conditions prescribed in subsection 6 of NRS 449.037 are met.	Y 876	<p>Y 876 - Resident # 6 has signed the agreement. See attachment #5</p>	

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Y 876	Continued From page 8 This Regulation is not met as evidenced by: Surveyor: 27364 Based on record review on 2/26/09, the facility failed to ensure an ultimate user agreement was obtained for 1 of 7 residents (Resident #6). Severity: 2 Scope: 1	Y 876	<i>Y 876</i> <i>A. Resident #6 has now</i> <i>a signed user agreement.</i> <i>See Attachment # 5.</i> <i>B. Residents' files will</i> <i>be checked monthly to</i> <i>ensure that they have</i> <i>user agreement. Adm</i> <i>will monitor for compliance.</i> <i>C. 4/8/09</i>	
Y 878 SS=I	449.2742(6)(a)(1) Medication / Change order NAC 449.2742 6. Except as otherwise provided in this subsection, a medication prescribed by a physician must be administered as prescribed by the physician. If a physician orders a change in the amount or times medication is to be administered to a resident: (a) The caregiver responsible for assisting in the administration of the medication shall: (1) Comply with the order. This Regulation is not met as evidenced by: Surveyor: 27364 Based on record review and interview on 2/26/09, the facility failed to ensure 3 of 7 residents received medications as prescribed (Resident #1, #2 and #3). Findings include: Resident #1:	Y 878	<i>Y 878</i> <i>A. The medications for</i> <i>resident #1, 2, & 3</i> <i>are accurately counted</i> <i>and listed on the</i> <i>Medication Adm Report;</i> <i>and on the PRN</i> <i>form if its PRN</i> <i>medication.</i> <i>B. Caregivers will be</i> <i>trained continuously</i> <i>on how to fill out</i>	

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Y 878	<p>Continued From page 9</p> <p>The bottle for Trazodone 100 mg tablets was in Resident #1's medication basket but was empty. Employee #2 said it was ordered 2 weeks ago.</p> <p>The bottle for Buspirone HCL 5 mg tablets was in Resident #1's medication basket but was empty.</p> <p>A bottle of Aldendroate Sodium 70 mg tablets was in Resident #1's medication basket but failed to be listed on the medication administration report (MAR).</p> <p>A bottle of Amitriptyline HCL 50 mg tablets was in Resident #1's medication basket but failed to be listed on the MAR</p> <p>A bottle of Clonazepam 1 mg tablets was in Resident #1's medication basket but failed to be listed the MAR.</p> <p>Resident #2:</p> <p>The order for Trazodone 100 mg was written to take 1 tablet by mouth daily at bedtime was listed on the as needed (PRN) log, not on the MAR. Employee #2 said "she (Resident #2) told me it was as needed, not a routine medication."</p> <p>The order for Hydrocodone 1 tablet, 3 times a day as needed for pain was recorded on the MAR not the PRN log.</p> <p>The bottle for Lithium Carbonate 300 mg tablets was in Resident #2's medication basket but was empty.</p> <p>Resident #3:</p> <p>All the medication bottles for Resident #3</p>	Y 878	<p><i>the medication administration report, or PRN form.</i></p> <p><i>The adm will monitor for compliance.</i></p> <p><i>c. 4/8/09</i></p>	

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SUPERVISOR'S SIGNATURE AND IDENTIFICATION
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Y 878	Continued From page 10 including, Abilify 15 mg tablets, Benztropine 0.5 mg tablets, Fluphenazine 5 mg tablets, Depakote ER 500 mg and Diphenhydramine 50 mg were empty. Employee #2 stated "she (Resident #3) refuses to take her medications." Employee #1 related he had called her Case Manager on 12/5/08 about her refusal to take her medications. Employee #1 reported her Case Manager replied he would get back to them. The surveyor informed Employee #1 and Employee #2, Resident #3's physician had to be notified within 12 hours of a resident refusing to take their medication. Record review on an incident report dated 12/05/08 prepared by Employee #2 indicated at on 12/5/08 at 10:10 AM, Employee #2 informed Resident #3's Case Manager that Resident #3 has no more medications and she refused to take them. The report also indicated Resident #3 does not like to take medications anymore, because she felt better. Severity: 3 Scope: 3	Y 878		
Y 936 SS=F	449.2749(1)(e) Resident file NAC 449.2749 1. A separate file must be maintained for each resident of a residential facility and retained for at least 5 years after he permanently leaves the facility. The file must be kept locked in a place that is resistant to fire and is protected against unauthorized use. The file must contain all records, letters, assessments, medical information and any other information related to the resident, including without limitation: (e) Evidence of compliance with the provisions	Y 936	<p>Y 936</p> <p>A. Resident 4 + 5 have their TB tests done see attachment #6. Resident #7 has left 3/19/09.</p> <p>B. Residents files will be checked monthly to ensure they have</p>	

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Bureau of Health Care Quality & Compliance

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NAME OF PROVIDER OR SUPPLIER ST MICHAELS GROUP HOME 2		STREET ADDRESS, CITY, STATE, ZIP CODE 4423 E WYOMING AVENUE LAS VEGAS, NV 89104		
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
Y 936	Continued From page 11 of chapter 441A of NRS and the regulations adopted pursuant thereto. This Regulation is not met as evidenced by: Surveyor: 27364 Based on record review on 2/26/09, the facility failed to ensure 3 of 7 residents complied with NAC 441A.380 regarding tuberculosis testing (Resident #4, #5 and #7). Severity: 2 Scope: 3	Y 936	<i>TB tests done - c. 4/8 /09</i>	
Y1010 SS=F	449.2764(1) MI Training NAC 449.2764 1. A person who provides care for a resident of a residential facility for persons with mental illnesses shall, within 60 days after he becomes employed at the facility, attend not less than 8 hours of training concerning care for residents who are suffering from mental illnesses. This Regulation is not met as evidenced by: Surveyor: 27364 Based on record review on 2/26/09, the facility failed to ensure a minimum of 8 hours of annual training related to mental illness for 2 of 4 employees (Employee #1, and #3). Severity: 2 Scope: 3	Y1010	<i>Y 1010 A. Employee #1 will enroll for 8-hrs of training on mental illness on May 28, 2009. Employee #3 has left 2/10/09. B. Employee files will be checked monthly to ensure that they're current on their training. Adm will monitor for compliance. c. 4/8 /09.</i>	

If deficiencies are cited, an approved plan of correction must be returned within 10 days after receipt of this statement of deficiencies.

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If continuation sheet 12 of 13

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LAS VEGAS, NEVADA

Bureau of Health Care Quality & Compliance

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